



TAX ASSESSOR  
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## New Tangible Account

### **Business information**

Company Name \_\_\_\_\_ D/B/A \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ FAX \_\_\_\_\_

Business Address \_\_\_\_\_

In Business as of \_\_\_\_\_ # of employees \_\_\_\_\_

Description Of business \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Owner(s) information**

Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Day time Phone (\_\_\_\_\_) \_\_\_\_\_

Oty	Item Description	Year Acquired	Acquisition Cost			

\_\_\_\_\_ Sign

\_\_\_\_\_ Date